United States Bankruptcy of DISTRICT OF ARIZO				, , , , , , , , , , , , , , , , , , , ,				Petition	
Name of Debtor (if individual, enter Last, First, Mi	idle):			Name of Joint De	ebtor (Spou	se)(Last, First, Middl	le):		
HOLLINGBERRY, CHAUNCEY									
All Other Names used by the Debtor in the la	st 8 years			All Other Names			he last 8 years		
(include married, maiden, and trade names): FKA CHAUNCEY COOK				(include married, m	aiden, and trad	e names):			
Last four digits of Soc. Sec. or Indvidual-Taxpayer I. (if more than one, state all): 7859	D. (ITIN) No./Comple	te EIN		Last four digits of S (if more than one, state		vidual-Taxpayer I.l	D. (ITIN) No./Comple	te EIN	
Street Address of Debtor (No. & Street, City, 3607 S 257TH LN	and State):			Street Address of	Joint Debtor	(No. & Stree	et, City, and State):		
Buckeye, AZ		ZIPCODE						ZIPCODE	
County of Residence or of the		85326		County of Reside	nce or of the				
Principal Place of Business: Marico	pa			Principal Place of					
Mailing Address of Debtor (if different from st	reet address):			Mailing Address	of Joint Debt	or (if different	from street address):		
SAME		ZIPCODE						ZIPCODE	
Location of Principal Assets of Business Debt (if different from street address above): NOT APP	or LICABLE							ZIPCODE	
Type of Debtor (Form of organization)	Nature o	f Business	;	Chapter o	of Bankrupt	cy Code Under	Which the Petition	ı is Filed	
(Check one box.)	(Check one b	,		Chapter 7	(Check on		napter 15 Petition for	r Recognition	
	Health Care Busi			Chapter 9			f a Foreign Main Pro	-	
See Exhibit D on page 2 of this form.	in 11 U.S.C. § 10		nea	Chapter 1		Ch	napter 15 Petition for	r Recognition	
Corporation (includes LLC and LLP)	Railroad			Chapter 12		□ of	a Foreign Nonmain	Proceeding	
Partnership Other (if debtor is not one of the above	Stockbroker			Nature of Debts (Check one box)					
entities, check this box and state type of	Commodity Brok	er		✓ Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an business debts.					
entity below	Clearing Bank Other			individual primarily for a personal, family,					
	Other			or household purpose"					
Chapter 15 Debtors Country of debtor's center of main interests:		npt Entity if applicable.)		~· · ·	Chap	ter 11 Debtors	:		
	Debtor is a tax-ex		ion -	Check one box: Debtor is a small business as defined in 11 U.S.C. § 101(51D).					
Each country in which a foreign proceeding by, regarding, or against debtor is pending:	under Title 26 of	the United Stat	oc -	Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).					
	Code (the Interna	al Revenue Cod					Ü	,	
Filing Fee (Check	one box)			Check if: Debtor's aggregate noncontingent liquidated debts (excluding debts					
Full Filing Fee attached				owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment					
Filing Fee to be paid in installments (applicable t attach signed application for the court's considera	-			on 4/01/16 and every three years thereafter).					
is unable to pay fee except in installments. Rule				Check all applica	able boxes:				
Filing Fee waiver requested (applicable to chapte	r 7 individuals only). M	1 ust		A plan is being	_	•			
attach signed application for the court's considera-	ion. See Offi cial Form	1 3B.		Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).					
Statistical/Administrative Information							THIS SPACE IS FOR	COURT USE ONLY	
Debtor estimates that funds will be available for	distribution to unsecu	red creditors.							
Debtor estimates that, after any exempt property distribution to unsecured creditors.	is excluded and admir	nistrative expen	ses paid,	there will be no fund	s available for				
Estimated Number of Creditors	П								
1-49 50-99 100-199 200-99	9 1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	Over 100,000			
Estimated Assets S0 to \$50,001 to \$100,001 to \$500,0									
\$50,000 \$100,000 \$500,000 to \$1	to \$10	\$10,000,001 to \$50	\$50,000,0 to \$100	to \$500	\$500,000,001 to \$1 billion	More than \$1 billion			
Estimated Liabilities	million	million	million	million			-		
Stimated Elabilities	01 \$1,000,001	\$10,000,001	\$50,000,0	001 \$100,000,001	\$500,000,001	More than			
\$50,000 \$100,000 \$500,000 to \$1	to \$10	to \$50 million	to \$100 million	to \$500 million	to \$1 billion	\$1 billion			
Case 2:14-bk-08576-	MOW Da	_ 4	1 ~ ~	~/^^/4 / E	ntered	06/03/14	17:22:04 	Desc	

Doc Tiled 06/03/14 Entered 06/03/14 17:22:04 Desc Main Document Page 1 of 47

B1 (Official Form 1) (4/13) FORM B1, Page Name of Debtor(s): Voluntary Petition (This page must be completed and filed in every case) CHAUNCEY HOLLINGBERRY All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Where Filed: Case Number: Date Filed: NONE Location Where Filed: Case Number: Date Filed: (If more than one, attach additional sheet) Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor Name of Debtor: Date Filed: NONE District: Relationship: Judge: Exhibit A Exhibit B (To be completed if debtor is required to file periodic reports (To be completed if debtor is an individual (e.g., forms 10K and 10Q) with the Securities and Exchange whose debts are primarily consumer debts) Commission pursuant to Section 13 or 15(d) of the Securities I, the attorney for the petitioner named in the foregoing petition, declare that I Exchange Act of 1934 and is requesting relief under Chapter 11) have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. §342(b). Exhibit A is attached and made a part of this petition 6/3/2014 /s/ MATTHEW HARTLEY Signature of Attorney for Debtor(s) Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and exhibit C is attached and made a part of this petition. \times No Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D, completed and signed by the debtor, is attached and made part of this petition. If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1) (4/13) FORM B1, Page 3 Name of Debtor(s): **Voluntary Petition** (This page must be completed and filed in every case) CHAUNCEY HOLLINGBERRY **Signatures** Signature(s) of Debtor(s) (Individual/Joint) Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts petition is true and correct, that I am the foreign representative of a debtor and has chosen to file under chapter 7] I am aware that I may proceed in a foreign proceeding, and that I am authorized to file this petition. under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to (Check only one box.) proceed under chapter 7. I request relief in accordance with chapter 15 of title 11, United States [If no attorney represents me and no bankruptcy petition preparer Code. Certified copies of the documents required by 11 U.S.C. § 1515 signs the petition] I have obtained and read the notice required by are attached. 11 U.S.C. §342(b) Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the I request relief in accordance with the chapter of title 11, United States chapter of title 11 specified in this petition. A certified copy of the Code, specified in this petition. order granting recognition of the foreign main proceeding is attached. X /s/ CHAUNCEY HOLLINGBERRY Signature of Debtor (Signature of Foreign Representative) Signature of Joint Debtor (Printed name of Foreign Representative) Telephone Number (if not represented by attorney) (Date) 6/3/2014 Signature of Attorney* Signature of Non-Attorney Bankruptcy Petition Preparer X /s/ MATTHEW HARTLEY I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for Signature of Attorney for Debtor(s) compensation and have provided the debtor with a copy of this document MATTHEW HARTLEY #014464 and the notices and information required under 11 U.S.C. §§ 110(b), 110 Printed Name of Attorney for Debtor(s) (h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services Hartley Law Center PLLC bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached. 11225 N 28th Dr. Suite B 103 Phoenix, AZ 85029 Printed Name and title, if any, of Bankruptcy Petition Preparer 602-296-7900 Telephone Number Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, 6/3/2014 responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. Address Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. Signature of bankruptcy petition preparer or officer, principal, The debtor requests the relief in accordance with the chapter of responsible person, or partner whose Social-Security number is provided title 11, United States Code, specified in this petition. Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual. Signature of Authorized Individual Printed Name of Authorized Individual If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. Title of Authorized Individual Date

briefing.

UNITED STATES BANKRUPTCY COURT DISTRICT OF ARIZONA PHOENIX DIVISION

In re CHAUNCEY HOLLINGBERRY	Case No. (if known)
	(11 1410-1111)
Debtor(s)	
EXHIBIT D - INDIVIDUAL DEBTOR'S STATEME CREDIT COUNSELING REQU	
WARNING: You must be able to check truthfully one of the five statements regarding of do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you whatever filing fee you paid, and your creditors will be able to resume collection activities you file another bankruptcy case later, you may be required to pay a second filing fee and creditors' collection activities.	credit counseling listed below. If you cannot ou do file. If that happens, you will lose against you. If your case is dismissed and
Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must be Exhibit D. Check one of the five statements below and attach any documents as directed.	omplete and file a separate
1. Within the 180 days before the filing of my bankruptcy case , I received a sagency approved by the United States trustee or bankruptcy administrator that outlined the opportur counseling and assisted me in performing a related budget analysis, and I have a certificate from the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plants.	nities for available credit e agency describing the
2. Within the 180 days before the filing of my bankruptcy case , I received a lagency approved by the United States trustee or bankruptcy administrator that outlined the opportur counseling and assisted me in performing a related budget analysis, but I do not have a certificate f the services provided to me. You must file a copy of a certificate from the agency describing the sa a copy of any debt repayment plan developed through the agency no later than 14 days after your	nities for available credit rom the agency describing services provided to you and
3. I certify that I requested credit counseling services from an approved agency but services during the seven days from the time I made my request, and the following exigent circumst of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]	
If your certification is satisfactory to the court, you must still obtain the credit counseling file your bankruptcy petition and promptly file a certificate from the agency that provided to debt management plan developed through the agency. Failure to fulfill these requirements Any extension of the 30-day deadline can be granted only for cause and is limited to a max	he counseling, together with a copy of any may result in dismissal of your case.

dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling

B 1D (Official Form 1, Exhibit D) (12/09)

	4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement]
[Must be accom	panied by a motion for determination by the court.]
	Incapacity. (Defined in 11 U.S.C. § 109 (h)(4) as impaired by reason of mental illness or mental deficiency
	so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
	Disability. (Defined in 11 U.S.C. § 109 (h)(4) as physically impaired to the extent of being unable, after
	reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
	Active military duty in a military combat zone.
of 11 U.S.C. §	5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement 109(h) does not apply in this district.
I certify	y under penalty of perjury that the information provided above is true and correct.
	Signature of Debtor: /s/ CHAUNCEY HOLLINGBERRY
	Date: 6/3/2014

Certificate Number: 12459-AZ-CC-023518121



CERTIFICATE OF COUNSELING

I CERTIFY that on June 1, 2014, at 8:47 o'clock AM PDT, Chauncey Hollingberry received from Abacus Credit Counseling, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the District of Arizona, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: June 1, 2014

By: /s/Vicky Torres

Name: Vicky Torres

Title:

Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

In re CHAUN	ICEY HOLLINGBERRY	statement (check one box as directed in Part I, III, or VI of this
	Debtor(s)	☐ The presumption arises.
	(-)	☐ The presumption does not arise.
Case Number:		☐ The presumption is temporarily inapplicable.
	(If known)	(Check the box as directed in Parts I, III, and VI of this statement.)

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS							
1A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.							
	Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).							
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.							
	Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.							
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.							
1C	Declaration of Reservists and National Guard MembersBy checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard							
	a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/							
	☐ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;							
	OR							
	b. I am performing homeland defense activity for a period of at least 90 days /or/							
	☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.							

		Part II. CALCULATION (OF MONTHLY INCO	ME FOR §	707(b)(7) EXCLUS	SION			
		I/filing status. Check the box that applied Jnmarried. Complete only Column A			nis statement as directed.				
	pen livin	b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only Column A ("Debtor's Income") for Lines 3-11.							
2		Married, not filing jointly, without the declumn A ("Debtor's Income") and Colu				both			
	d. 🔲 N	Married, filing jointly. Complete both Ces 3-11.	• •	•		for			
	All figu	res must reflect average monthly income				Column A	Column B		
	If the a	ar months prior to filing the bankruptcy omount of monthly income varied during t				Debtor's	Spouse's		
3		ter the result on the appropriate line.				Income	Income		
3		wages, salary, tips, bonuses, overtir				\$2,308.10	\$		
		e from the operation of a business, pance in the appropriate column(s) of Line							
		nter aggregate numbers and provide de							
4		include any part of the business exp	penses entered on Line b		in Part V.	1			
	a.	Gross receipts		\$0.00					
	b.	Ordinary and necessary business exp	enses	\$0.00	o from Line o	\$0.00	\$		
	C.	Business income		Subtract Line b	o from Line a				
			ubtract Line b from Line a ar						
	in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.								
5	a.	Gross receipts		\$0.00					
	b.	Ordinary and necessary operating exp	enses	\$0.00					
	C.	Rent and other real property income		Subtract Line b	o from Line a	\$0.00	\$		
6	Interes	st, dividends, and royalties.				\$0.00	\$		
7	Pensio	on and retirement income.				\$0.00	\$		
		nounts paid by another person or en							
8		btor or the debtor's dependents, incl							
O	Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Each regular payment should be reported in only one column; if a payment is listed in Column A,					\$0.00	\$		
	do not i	report that payment in Column B.							
	Unemp	ployment compensation. Enter the	e amount in the appropriate of	olumn(s) of Line	e 9.				
	However, if you contend that unemployment compensation received by you or your spouse								
9	was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:								
	Unem	nployment compensation claimed to							
		benefit under the Social Security Act	Debtor <u>\$0.00</u>	Spouse _\$		\$0.00	\$		
	Income	e from all other sources. Specify	source and amount. If neces	sary, list addition	onal sources on a				
10	•	te page. Do not include alimony or	•						
10		mn B is completed, but include all of include any benefits received under the		-					
		crime against humanity, or as a victim of			a violini oi a viai				
	a.			0					
	b.	+		0					
		and enter on Line 10				\$0.00	¢.		
		and enter on Line 10	(07/h)(7) Add Linno 24h	10 in		\$0.00	\$		
11		tal of Current Monthly Income for § 7 n A, and, if Column B is completed, add				\$2,308.10	\$		

12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.	\$2,308.10

Part III. APPLICATION OF § 707(b)(7) EXCLUSION						
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$27,697.20				
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at the bankruptcy court.) a. Enter debtor's state of residence:ARIZONA b. Enter debtor's household size:1	\$42,608.00				
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed. The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII. The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.					

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).

Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)								
16	16 Enter the amount from Line 12.							
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero. \$ b. \$ c. \$							
	Total and enter on Line 17		\$					
18	Current monthly income for § 707(b)(2). Subtract Lin	ne 17 from Line 16 and enter the result.	\$					

	Part V. CALCULATION OF DEDUCTIONS FROM INCOME						
	Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)						
19A	National Standards: food, clothing, and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.	\$					

19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoi.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.							
	Household members under 65 years of age		Household members 65 yea		s of age or o	lder		
	a1. Allowance per member		a2.	Allowance per member				
	b1. Number of members		b2.	Number of members				
	c1. Subtotal		c2.	Subtotal				\$
20A	Local Standards: housing and utilities; non IRS Housing and Utilities Standards; non-mortg information is available at www.usdoj.gov/ust/ size consists of the number that would currently plus the number of any additional dependents w	page expenses for from the clerk be allowed as e	or the a c of the xempt	applicable county and family e bankruptcy court). The app	size. (This plicable family			\$
20B	Local Standards: housing and utilities; mortgage/rent expenses. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.							
	a. IRS Housing and Utilities Standards; mob. Average Monthly Payment for any debts		CHSC		\$		1	
	home, if any, as stated in Line 42				\$			
	c. Net mortgage/rental expense				Subtract Line	b from Line a.	ᆀ	\$
21	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:							\$
	Local Standards: transportation; vehicle op							
	You are entitled to an expense allowance in this operating a vehicle and regardless of whether was a second control of the con	0,0		, , , .	ses of			
22A	operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8. ☑ 0 ☐ 1 ☐ 2 or more. If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoi.gov/ust/ or from the clerk of the bankruptcy court.)							\$
22B	Local Standards: transportation; additional for a vehicle and also use public transportation, for your public transportation expenses, enter of Standards: Transportation. (This amount is available)	and you contend n Line 22B the "F	d that y Public	ou are entitled to an addition Transportation" amount fron	n IRS Local	•		\$

	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)							
	☐ 1 ☐ 2 or more.							
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ for mother the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.							
	a. IRS Transportation Standards, Ownership Costs	\$						
	b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$			\$			
	c. Net ownership/lease expense for Vehicle 1	Subtract Line	b from Line a.					
24	Local Standards: transportation ownership/lease expense; Vehicle Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy courthe Average Monthly Payments for any debts secured by Vehicle 2, as staffrom Line a and enter the result in Line 24. Do not enter an amount lease the contraction of the cont	Local Standard rt); enter in Line ated in Line 42;	e b the total of subtract Line b					
	 a. IRS Transportation Standards, Ownership Costs b. Average Monthly Payment for any debts secured by Vehicle 2, 		\$	-				
	as stated in Line 42		\$					
	c. Net ownership/lease expense for Vehicle 2		Subtract Line b from Line a.		\$			
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social-security taxes, and Medicare taxes. Do not include real estate or sales taxes.							
26	Other Necessary Expenses: mandatory payroll deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.							
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.							
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 44.							
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.							
30	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.							
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.							
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service such as pagers, call waiting, caller id, special long distance, or internet service to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.							
33	Total Expenses Allowed under IRS Standards. Enter the total of Lin	nes 19 through	32		\$			
55	Total Expenses Anomou under into standards. Enter the total of Elifes 18 tillough 52							

			bpart B: Additional Living l include any expenses that	•				
	Health Insurance, Disability Insurance and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.							
	a.	Health Insurance	\$					
	b.	Disability Insurance	\$					
34	C.	Health Savings Account	\$					
	Total	and enter on Line 34				\$		
	-	u do not actually expend the below:	his total amount, state your actual tota	al average monthly exper	nditures in the			
35	monthl elderly	y expenses that you will cont	care of household or family members tinue to pay for the reasonable and neces nember of your household or member of	ssary care and support o	f an	\$		
36	incurre		ce. Enter the total average reasonabur family under the Family Violence Preature of these expenses is required to be	vention and Services Act	tor	\$		
37	Local S provid	Standards for Housing and U le your case trustee with d	tal average monthly amount, in excess of drilities, that you actually expend for homo documentation of your actual expens- not already accounted for in the IRS S	e energy costs. You es, and you must dem	must	\$		
38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.							
39	clothing Standa or from	ards, not to exceed 5% of tho	pense. Enter the total average month bined allowances for food and clothing (a use combined allowances. (This informat court.) You must demonstrate that	apparel and services) in to ion is available at was	he IRS National <u>ww.usdoj.gov/ust/</u>	\$		
40		nued charitable contribution f cash or financial instrument	ons. Enter the amount that you will c ts to a charitable organization as defined			\$		
41	Total A	Additional Expense Deduc	etions under § 707(b). Enter the total	of Lines 34 through 40		\$		
			Subpart C: Deductions for	or Debt Payment	1			
	Future payments on secured claims. For each of your debts that is secured by an interest in proprerty that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.							
42		Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?			
42	a.			\$	☐ yes ☐no			
	b.			\$	☐ yes ☐no			
	C.			\$	☐ yes ☐no			
	d. e.			\$	☐ yes ☐no ☐ yes ☐no			
	J			Total: Add Lines a - e	·	\$		
				Total. Add Lilles a - e		Ψ		

	reside you m in add would	nay include in your deduction dition to the payments listed i I include any sums in default	er property necessary for your support 1/60th of any amount (the "cure amount")	unt") that you must pay the creditor sion of the property. The cure amount possession or foreclosure. List and			
		Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount			
43	a.			\$			
	b.			\$			
	C.			\$			
	d.			\$			
	e.			\$			
				Total: Add Lines a - e	\$		
44	as pri	ority tax, child support and a	ty claims. Enter the total amount, div limony claims, for which you were liab ons, such as those set out in Line 2	· · ·	\$		
	the fo		enses. If you are eligible to file a case nount in line a by the amount in line b,		_		
	a.	a. Projected average monthly Chapter 13 plan payment.					
45	b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)						
	C. Average monthly administrative expense of Chapter 13 case Total: Multiply Lines a and b						
	Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.						
46	Total	Deductions for Debt Payr	ment. Enter the total of Lines 42 th	rough 45.	\$		
46	Total	Deductions for Debt Payı	Subpart D: Total Deduction		\$		
46		Deductions for Debt Payr of all deductions allowed	Subpart D: Total Deduc		\$		
		of all deductions allowed	Subpart D: Total Deduction under § 707(b)(2). Enter the total	ctions from Income			
	Total	of all deductions allowed	Subpart D: Total Deduction under § 707(b)(2). Enter the total	ctions from Income I of Lines 33, 41, and 46. § 707(b)(2) PRESUMPTION			
47	Total	of all deductions allowed Part \ the amount from Line 18	Subpart D: Total Deduction of § 707(b)(2). Enter the total	ctions from Income I of Lines 33, 41, and 46. § 707(b)(2) PRESUMPTION (b)(2))	\$		
47	Total Enter	of all deductions allowed Part \ the amount from Line 18 the amount from Line 47 hly disposable income un	Subpart D: Total Deductions allowed under § 707(b)(2). Enter the total /I. DETERMINATION OF § (Current monthly income for § 707) (Total of all deductions allowed un	ctions from Income I of Lines 33, 41, and 46. § 707(b)(2) PRESUMPTION (b)(2))	\$		
47 48 49	Enter Enter Montresult	of all deductions allowed Part \ the amount from Line 18 the amount from Line 47 hly disposable income un	Subpart D: Total Deductions allowed under § 707(b)(2). Enter the total II. DETERMINATION OF § (Current monthly income for § 707 (Total of all deductions allowed under § 707(b)(2). Subtract Line 49	ctions from Income I of Lines 33, 41, and 46. § 707(b)(2) PRESUMPTION I(b)(2)) Ider § 707(b)(2))	\$ \$ \$		
47 48 49 50	Enter Enter Mont result 60-m numb Initia	of all deductions allowed Part \ The amount from Line 18 The amount from Line 47 Thly disposable income under 60 and enter the result. I presumption determination amount on Line 51 is less tatement, and complete the ele amount set forth on Line 1 of this statement, and cor	Subpart D: Total Deductions allowed under § 707(b)(2). Enter the total III. DETERMINATION OF § (Current monthly income for § 707 (Total of all deductions allowed under § 707(b)(2). Subtract Line 49 and on. Check the applicable box and proses than \$7,475* Check the box for "verification in Part VIII. Do not complete 51 is more than \$12,475* Check	ctions from Income I of Lines 33, 41, and 46. § 707(b)(2) PRESUMPTION (b)(2)) Ider § 707(b)(2)) from Line 48 and enter the ount in Line 50 by the occeed as directed. The presumption does not arise" at the top of page 1 of the the remainder of Part VI. ck the box for "The presumption arises" at the top of may also complete Part VIII. Do not complete the remainder.	\$ \$ \$ \$		
47 48 49 50 51	Enter Enter Montresult 60-menumb Initia Inthis s In The page In The VI (L.	Part \ The amount from Line 18 The amount from Line 47 Thly disposable income under 60 and enter the result. Il presumption determinative amount on Line 51 is less statement, and complete the eamount set forth on Line 1 of this statement, and core amount on Line 51 is at ines 53 through 55).	Subpart D: Total Deductions allowed under § 707(b)(2). Enter the total III. DETERMINATION OF § (Current monthly income for § 707 (Total of all deductions allowed under § 707(b)(2). Subtract Line 49 nder § 707(b)(2). Multiply the amount on. Check the applicable box and prosest than \$7,475* Check the box for "verification in Part VIII. Do not complete 51 is more than \$12,475* Chent plete the verification in Part VIII. You	ctions from Income I of Lines 33, 41, and 46. § 707(b)(2) PRESUMPTION (b)(2)) Ider § 707(b)(2)) from Line 48 and enter the ount in Line 50 by the occeed as directed. The presumption does not arise" at the top of page 1 of the the remainder of Part VI. ck the box for "The presumption arises" at the top of may also complete Part VIII. Do not complete the remainder.	\$ \$ \$ \$		
47 48 49 50 51	Enter Enter Montresult 60-menumb Initia ☐ The this see ☐ The YI (L) Enter	of all deductions allowed Part \ The amount from Line 18 The amount from Line 47 Thly disposable income uner 60 and enter the result. I presumption determinative amount on Line 51 is less tatement, and complete the endount set forth on Line 1 of this statement, and correct amount on Line 51 is at ines 53 through 55). The amount of your total shold debt payment amounts	Subpart D: Total Deductions allowed under § 707(b)(2). Enter the total I/I. DETERMINATION OF § (Current monthly income for § 707 (Total of all deductions allowed under § 707(b)(2). Subtract Line 49 ander § 707(b)(2). Multiply the amount on. Check the applicable box and prosest than \$7,475* Check the box for "verification in Part VIII. Do not complete the verification in Part VIII. You least \$7,475*, but not more than \$1 con-priority unsecured debt	ctions from Income I of Lines 33, 41, and 46. § 707(b)(2) PRESUMPTION (b)(2)) Inder § 707(b)(2)) from Line 48 and enter the count in Line 50 by the coceed as directed. The presumption does not arise" at the top of page 1 of the teremainder of Part VI. ck the box for "The presumption arises" at the top of may also complete Part VII. Do not complete the remainder 2,475*. Complete the remainder of Part	\$ \$ \$ \$ \$ der of Part VI.		

Date: 6/3/2014

57

22A (C	otticial i	Form 22A) (Chapter 7) (4/13) - Cont		0	
		PART VII. ADDITIONAL I	EXPENSE CLAIMS		
56	health month	Expenses. List and describe any monthly expenses, not otherwise and welfare of you and your family and that you contend should be ally income under § 707(b)(2)(A)(ii)(I). If necessary, list additional so expense monthly expense for each item. Total the expenses.	an additional deduction from your current		
		Expense Description	Monthly Amount		
00	a.		\$		
	b.		\$		
	C.		\$		
		Total: Add Lines a, b, and c	\$		
		Part VIII: VERIF	CATION		
		are under penalty of perjury that the information provided in this state	ement is true and correct. (If this a joint case,		
5 7	Date: 6/3/2014 Signature: /s/ CHAUNCEY HOLLINGBERRY				

(Joint Debtor, if any)

(Debtor)

Signature: _

^{*}Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

UNITED STATES BANKRUPTCY COURT DISTRICT OF ARIZONA PHOENIX DIVISION

In re	CHAUNCEY HOLLINGBERRY		Case No.
	FKa CHAUNCEY COOK		Chapter 7
		/ Debtor	
	Attorney for Debtor: MATTHEW HARTLEY		

STATEMENT PURSUANT TO RULE 2016(B)

The undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:

- 1. The undersigned is the attorney for the debtor(s) in this case.
- 2. The compensation paid or agreed to be paid by the debtor(s), to the undersigned is:
- 3. \$ 0.00 of the filing fee in this case has been paid.
- 4. The Services rendered or to be rendered include the following:
 - a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code.
 - b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the court.
 - c) Representation of the debtor(s) at the meeting of creditors.
- 5. The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for services performed, and

None other

6. The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, will be from earnings, wages and compensation for services performed, and

None other

7. The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated:

None

8. The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows:

None

Dated: 6/3/2014 Respectfully submitted,

X/s/ MATTHEW HARTLEY

Attorney for Petitioner: MATTHEW HARTLEY

Hartley Law Center PLLC 11225 N 28th Dr. Suite B 103 Phoenix AZ 85029 602-296-7900

UNITED STATES BANKRUPTCY COURT DISTRICT OF ARIZONA PHOENIX DIVISION

In re <i>CHA</i>	JNCEY	HOLLINGBERRY		Case No. Chapter	7
			/ Debtor		

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data"if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	Attached (Yes/No)	No. of Sheets	ASSETS	LIABILITIES	OTHER
A-Real Property	Yes	1	\$ 90,000.00		
B-Personal Property	Yes	3	\$ 6,460.00		
C-Property Claimed as Exempt	Yes	1			
D-Creditors Holding Secured Claims	Yes	1		\$ 77,699.07	
E-Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$ 0.00	
F-Creditors Holding Unsecured Nonpriority Claims	Yes	3		\$ 97,238.79	
G-Executory Contracts and Unexpired Leases	Yes	1			
H-Codebtors	Yes	1			
I-Current Income of Individual Debtor(s)	Yes	1			\$ 2,201.81
J-Current Expenditures of Individual Debtor(s)	Yes	1			\$ 2,308.60
тот	AL	15	\$ 96,460.00	\$ 174,937.86	

UNITED STATES BANKRUPTCY COURT DISTRICT OF ARIZONA PHOENIX DIVISION

In re <i>CHAUNCEY HOLLI</i>	NGBERRY		Case No.	
			Chapter 2	7
		/ Debtor		

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8), filing a case under chapter 7, 11, or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$0.00
Student Loan Obligations (from Schedule F)	\$29,324.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$29,324.00

State the following:

Average Income (from Schedule I, Line 12)	\$2,201.81
Average Expenses (from Schedule J, Line 22)	\$2,308.60
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$2,308.10

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	\$0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
4. Total from Schedule F		\$ 97,238.79
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 97,238.79

n re <i>CHAUNCEY HOLLINGBERRY</i> D	Debtor	Case No(if known)
DECLARAT	ION CONCERNING DEBTOR'S	S SCHEDULES
DECLARATION	UNDER PENALTY OF PERJURY BY AN I	NDIVIDUAL DEBTOR
I declare under penalty of perjury that I have reaccorrect to the best of my knowledge, information	ad the foregoing summary and schedules, consisting of n and belief.	sheets, and that they are true and
Date: 6/2/2014	Signature /s/ CHAUNCEY HOLLINGBE	TRRY
	CHAUNCEY HOLLINGBERRY	
	[If joint case, both spouses must sign.]	
Penalty for making a false statement or conceal	ling property: Fine of up to \$500,000 or imprisonment for	up to 5 years or both. 18 U.S.C. §§ 152 and 3571.
CERTIFICATION AND SIGNATURE O	OF NON-ATTORNEY BANKRUPTCY PETI	TION PREPARER (See 11.U.S.C. § 110)
certify that I am a bankruptcy preparer as defined in with a copy of this document.	n 11 U.S.C. § 110, that I prepared this document for com	pensation, and that I have provided the debtor
Preparer:	Social secu	ırity No. :
Names and Social Security numbers of all other indiv	viduals who prepared or assisted in preparing this docum	ent:
If more than one person prepared this document, atta	ach additional signed sheets conforming to the appropriat	e Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

In re <i>chauncey</i>	HOLLINGBERRY	,	Case No	
	Debtor(s)	·		(if known)

SCHEDULE A-REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Secured Claim or	Amount of Secured Claim
REAL ESTATE: 3607 S 257TH LN. BU AZ 85326	YE, Fee Simple	\$90,000.00	\$77,699.07

No continuation sheets attached TOTAL \$ 90,000. (Report also on Summary of Schedules.)

In re CHAUNCEY HOLLINGBERRY	Case No.
Debtor(s)	(if known

SCHEDULE B-PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N o n e	Description and Location of Property	Husband- Wife- Joint Community-	W J	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
1. Cash on hand.	X				
Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X				
 Security deposits with public utilities, telephone companies, landlords, and others. 	X				
Household goods and furnishings, including audio, video, and computer equipment.		HOUSEHOLD ITEMS Location: In debtor's possession			\$960.00
Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X				
6. Wearing apparel.		CLOTHING Location: In debtor's possession			\$500.00
7. Furs and jewelry.	X				
Firearms and sports, photographic, and other hobby equipment.	X				
Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X				
10. Annuities. Itemize and name each issuer.	X				
11. Interest in an education IRA as defined in 26 U.S.C. 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. 521(c).)	X				
Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X				

n r	е	CHAUNCEY	HOLLINGBERRY
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Case No.	
	(if known)

Debtor(s)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

		(Continuation Sneet)			
Type of Property	N	Description and Location of Property			Current Value of Debtor's Interest,
	o n		Husband Wife Joint-	-W J	in Property Without Deducting any Secured Claim or
	е		Community-	-C	Exemption
Stock and interests in incorporated and unincorporated businesses. Itemize.	X				
14. Interests in partnerships or joint ventures. Itemize.	X				
Government and corporate bonds and other negotiable and non-negotiable instruments.	X				
16. Accounts Receivable.	X				
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X				
Other liquidated debts owed to debtor including tax refunds. Give particulars.	X				
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X				
Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X				
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X				
22. Patents, copyrights, and other intellectual property. Give particulars.	X				
23. Licenses, franchises, and other general intangibles. Give particulars.	x				
24. Customer lists or other compilations containing personally identifiable information (as described in 11 U.S.C. 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X				
25. Automobiles, trucks, trailers and other vehicles and accessories.		VEHICLE 1: 2006 CHEVY COBALT WITH 117,000 MILES IN GOOD CONDITION (VALUE TAKEN FROM KBB.COM)			\$5,000.00
		Location: In debtor's possession			
26. Boats, motors, and accessories.	x				
27. Aircraft and accessories.	X				
28. Office equipment, furnishings, and supplies.	x				

n	r۵	CHAUNCEY	HOLLINGBERRY
н	16	CITACIACEI	TIOULING DERKY

(if known)

Debtor(s)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

		(Continuation Officer)			
Type of Property	Z	Description and Location of Property			Current Value of Debtor's Interest,
	o n		Husband- Wife- Joint-	-W J	in Property Without Deducting any Secured Claim or Exemption
	е	C	community-	-C	Exemption
29. Machinery, fixtures, equipment and supplies used in business.	X				
30. Inventory.	X				
31. Animals.	X				
32. Crops - growing or harvested. Give particulars.	X				
33. Farming equipment and implements.	X				
34. Farm supplies, chemicals, and feed.	X				
35. Other personal property of any kind not already listed. Itemize.	X				

In re CHAUNCEY HOLLINGBERRY	Case No.
Debtor(s)	

SCHEDULE C-PROPERTY CLAIMED AS EXEMPT

(if known)

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds \$155,675.*
(Check one box)	
☐ 11 U.S.C. § 522(b) (2)	
☑ 11 U.S.C. § 522(b) (3)	

Description of Property	Specify Law Providing each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemptions
REAL ESTATE: 3607 S 257TH LN. BUCKEYE, AZ 85326	ARS 33-1101	\$ 12,300.93	\$ 90,000.00
HOUSEHOLD ITEMS	ARS 33-1123(1)-(17)	\$ 960.00	\$ 960.00
CLOTHING	ARS 33-1125(1)	\$ 500.00	\$ 500.00
VEHICLE 1: 2006 CHEVY COBALT	ARS 33-1125 (8)	\$ 5,000.00	\$ 5,000.00
Page No. <u>1</u> of <u>1</u>			

In reCHAUNCEY HOLLINGBERRY	_, Case No.	
Debtor(s)	(if I	(nown)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Creditor's Name and Mailing Address Including ZIP Code and Account Number (See Instructions Above.)	Co-Debtor	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien HHusband WWife JJoint CCommunity	Contingent	151:01:02	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, If Any
Account No: 5403						\$ 77,699.07	\$ 0.00
Creditor # : 1 MOVEMENT MORTGAGE 1 CORPORATE DR SUITE 360 Lake Zurich IL 60047		Mortgage REAL ESTATE: 3607 S 257TH LN. BUCKEYE, AZ 85326 Value: \$ 90,000.00					
Account No:	ļ						
		Value:					
No continuation sheets attached	1		Subt			\$ 77,699.07	\$ 0.00
		(To		ot	al\$	\$ 77,699.07	\$ 0.00

Report also on Summary of (If applicable, report also on

In	r۵	CHAUNCEY	HOLLINGBERRY
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Debtor(s)

Case No.

(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or quardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts Report the total of amounts NOT entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). Deposits by individuals Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 ☐ Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using

alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re CHAUNCEY HOLLINGBERRY	. ,	Case No.	
D 1(()			

Debtor(s)

(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Type of Priority for Claims Listed on This Sheet:		Ta	xes and Certain Other Debts	0	we	ed	to Governm	ental Units	!
Creditor's Name, Mailing Address Including ZIP Code, and Account Number (See instructions above.)	Co-Debtor	J. C.	Date Claim was Incurred and Consideration for Claim Husband Wife Joint Community	Contingent	Unliquidated	Disputed	Amount of Claim	Amount Entitled to Priority	Amount not Entitled to Priority, if any
Account No: Creditor # : 1 ARIZONA DEPARTMENT OF REVENUE 1600 W MONROE STREET Phoenix AZ 85007			State income taxes				Unknown	\$ 0.00	
Account No: Creditor # : 2 IRS PO BOX 21126 Philadelphia PA 19114			Federal income taxes				Unknown	\$ 0.00	
Account No:									
Account No:									
Account No:									
Sheet No. 1 of 1 continuation sheet attached to Schedule of Creditors Holding Priority		lain	Sub (Total of ns (Use only on last page of the completed Schedule E. Report on Summary of Sc	this Tot tota	pa tal ıl al	ge) \$ so	0.00		
				Tot	t al abl	\$ e,		0.00	0.00

In re CHAUNCEY HOLLINGBE

Case No.

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules, and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	JJ	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband Wife oint Community	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 7PA0 Creditor # : 1 AMERICAN EDUCATION SERVICES/RBS 1200 N 7TH ST Harrisburg PA 17102			Student Loan				\$ 29,322.00
Account No: 1004 Creditor # : 2 AMERICAN EXPRESS PO BOX 981537 El Paso TX 79998			CHARGES				\$ 6,064.41
Account No: 4935 Creditor # : 3 AMERICAN EXPRESS PO BOX 981537 El Paso TX 79998			CHARGES				\$ 2,694.00
2 continuation sheets attached	1		(Use only on last page of the completed Schedule F. Report also		Γota	al\$	\$ 38,080.41

Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re CHAUNCEY HOLLINGBERRY

Case No.

Debtor(s)

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	J,	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband Wife Joint Community	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 6833 Creditor # : 4 BANK OF AMERICA PO BOX 982235 El Paso TX 79998			CHARGES				\$ 9,506.38
Account No: 6033 Creditor # : 5 BANK OF AMERICA PO BOX 982235 El Paso TX 79998			CHARGES				\$ 17,059.00
Account No: 7PA0 Creditor # : 6 CHARTER ONE BANK, FSB 833 BROADWAY Albany NY 12207			CHARGES				\$ 29,322.00
Account No: 1009 Creditor # : 7 CHASE CARD SERVICES PO BOX 15298 Wilmington DE 19850			CHARGES				\$ 3,269.00
Account No: 3FD0 Creditor # : 8 FEDERAL LOAN SERVICING PO BOX 60610 Harrisburg PA 17106			Student Loan				\$ 2.00
Sheet No. 1 of 2 continuation sheets at Creditors Holding Unsecured Nonpriority Claims	tached t	to So	chedule of (Use only on last page of the completed Schedule F. Report and Schedule F. Report Schedules and, if applicable, on the Statistical Summary of Certain Lia	also on Sur	Tot	al \$ iry of	\$ 59,158.38

ln	re	CHAUNCEY	HOLLINGBERR
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Debtor	(8)

Case No	
	(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

			T				
Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	J	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband Wife Joint Community	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 4332							Unknown
Creditor # : 9 GINDIRA KELL MCLEMORE 4433 W PASEO WAY Laveen AZ 85339			JUDGMENT DUES				
Account No: 4332							Unknown
Creditor # : 10 SOUTH MOUNTAIN JUSTICE COURT C/O FINDIRA KELLY MCLEMORE 620 W. Jackson St Phoenix AZ 85003			JUDGMENT DUES				
Account No:							
Account No:							
Account No:							
Sheet No. 2 of 2 continuation sheets attached	ed t	o So	chedule of	ubte	otal	\$	\$ 0.00
Creditors Holding Unsecured Nonpriority Claims			(Use only on last page of the completed Schedule F. Report also or	T Sum	ota	I \$ y of	\$ 97,238.79
			Schedules and, if applicable, on the Statistical Summary of Certain Liabilities				

n re	CHAUNCEY	HOLLINGBERRY
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/[Debto
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Case No.	

(if known)

SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State the nature of debtor's interests in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

□ Check this box if the debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract.	Description of Contract or Lease and Nature of Debtor's Interest. State whether Lease is for Nonresidential Real Property. State Contract Number of any Government Contract.

In re CHAUNCEY HOLLINGBERRY	/ Debtor	Case No.	
			(if known)

SCHEDULE H-CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preeceding the commencement of the case, identify the name of the debtors spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

□ Check this box if the debtor has no codebtors.

Name and Address of Codebtor	Name and Address of Creditor

Fill in this information to identify	your case:				
Debtor 1 CHAUNCEY HOLLIN	GBERRY				
First Name Debtor 2	Middle Name	Last Name			
(Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: _	District o	ARIZONA	—		
Case number(If known)				Check if t	
				=	nended filing Dlement showing post-petition
					er 13 income as of the following date:
Official Form B 6I				MM / DI	D / YYYY
Schedule I: You	ır Income				12/13
supplying correct information. If yo	u are married and not fili se is not filing with you, o top of any additional pag	ng jointly, and you do not include info	r spouse is rmation abo	living with your spo	or 2), both are equally responsible for /ou, include information about your spouse use. If more space is needed, attach a known). Answer every question.
Fill in your employment					
information.		Debtor 1			Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employe	d		Employed Not employed
Include part-time, seasonal, or self-employed work.					
Occupation may Include student or homemaker, if it applies.	Occupation	SET UP AGEN	T		
	Employer's name	WASTE MANA	GEMENT		
	Employer's address	2625 W GRAN Number Street	DVIEW		Number Street
		Phoenix	AZ 8	5027	
		City	State ZIP	Code	City State ZIP Code
	How long employed then	re? 1 YEAR			
Part 2: Give Details About	Monthly Income				
Estimate monthly income as of spouse unless you are separated. If you or your non-filing spouse habelow. If you need more space, at	ve more than one employe	er, combine the infor			rite \$0 in the space. Include your non-filing or that person on the lines
			For	Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, sala deductions). If not paid monthly,			2. \$	2384.20	\$0.00_
3. Estimate and list monthly over	time pay.		3. +\$	0.00	+ \$0.00_
4. Calculate gross income. Add lin	ne 2 + line 3.		4. \$	2384.20	\$0.00

st Name Middle Name Last Name

Case number (if known)______

		For	Debtor 1			ebtor 2 or ling spouse	
Copy line 4 here	→ 4.	\$	2384.20		\$	0.00	
5. List all payroll deductions:							
5a. Tax, Medicare, and Social Security deductions	5a.	\$	182.39		\$	0.00	
5b. Mandatory contributions for retirement plans	5b.	\$	0.00		\$	0.00	
5c. Voluntary contributions for retirement plans	5c.	\$	0.00		\$	0.00	
5d. Required repayments of retirement fund loans	5d.	\$	0.00		\$	0.00	
5e. Insurance	5e.	\$	0.00		\$	0.00	
5f. Domestic support obligations	5f.	\$	0.00		\$	0.00	
5g. Union dues	5g.	\$	0.00		\$	0.00	
5h. Other deductions. Specify:	5h.	+\$	0.00		+ \$	0.00	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +	-5h. 6.	\$	182.39		\$	0.00	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2201.81		\$	0.00	
8. List all other income regularly received:							
8a. Net income from rental property and from operating a business, profession, or farm							
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		\$	0.00		\$	0.00	
monthly net income. 8b. Interest and dividends	8a.	Φ	0.00		¢	0.00	
Rec. Family support payments that you, a non-filing spouse, or a dependently receive	8b. endent	Φ			Φ		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	e 8c.	\$	0.00		\$	0.00	
8d. Unemployment compensation	8d.	\$	0.00		\$	0.00	
8e. Social Security	8e.	\$	0.00		\$	0.00	
8f. Other government assistance that you regularly receive							
Include cash assistance and the value (if known) of any non-cash ass that you receive, such as food stamps (benefits under the Supplemen Nutrition Assistance Program) or housing subsidies.		\$	0.00		\$	0.00	
Specify:	8f.						
8g. Pension or retirement income	8g.	\$	0.00		\$	0.00	
8h. Other monthly income. Specify:	8h.	+\$_	0.00		+\$	0.00	
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0.00		\$	0.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	2,201.81	+	\$	0.00	= \$2201.81_
11. State all other regular contributions to the expenses that you list in S	chedule J	_					
Include contributions from an unmarried partner, members of your househother friends or relatives.	old, your d	epende	ents, your roo	omm	nates, a	nd	
Do not include any amounts already included in lines 2-10 or amounts that	are not av	ailable	to pay expe	nse	s listed		0.00
Specify:					-	11.	+ \$0.00
 Add the amount in the last column of line 10 to the amount in line 11. Write that amount on the Summary of Schedules and Statistical Summary 					•		\$2201.81_
13. Do you expect an increase or decrease within the year after you file t	hie form?						Combined monthly income
No.	ans IUIII!						
Yes. Explain:							

Fill ir	n this i	nformation to identify	your case:				
Debto	or 1	CHAUNCEY HOLLIN			Check if this is:		
Debto	or 2	First Name	Middle Name Last Name	e	An amended fil	lina	
) First Name	Middle Name Last Name			•	petition chapter 13
United	d States	Bankruptcy Court for the:_	District of ARIZ	ONA	expenses as of		
Case (If kno	number				MM / DD / YYYY		
					A separate filin maintains a se		2 because Debtor 2
Offic	cial	Form B 6J			mamams a se	parate flouser	Ioid
Scl	hed	dule J: Yo	ur Expenses				12/13
inform	ation.		ossible. If two married people are ed, attach another sheet to this f				_
Part 1	1:	Describe Your Hou	usehold				
1. Is th	is a jo	int case?					
	-	o to line 2.	separate household?				
		No Yes. Debtor 2 must file	e a separate Schedule J.				
2. Do y	you ha	ve dependents?	V No	B I		5	
	not list I	Debtor 1 and	Yes. Fill out this information each dependent			Dependent's age	Does dependent live with you?
Do r		e the dependents'	·				No Yes
							No
							Yes
							□ No □ Yes
							No
							Yes
							No
							Yes
expe	enses	penses include of people other than nd your dependents?	✓ No Yes				
Part 2	: E	stimate Your Ongoi	ing Monthly Expenses				
	ses as	of a date after the bar	r bankruptcy filing date unless yonkruptcy is filed. If this is a supp	_		=	
	-	•	n-cash government assistance if ded it on Schedule I: Your Incom	•		Your expe	nses
4. The	e renta		expenses for your residence. Inc			\$	553.60
-		uded in line 4:					
4a.	Real	estate taxes			4a.	\$	0.00
4b.	Prop	erty, homeowner's, or r	renter's insurance		4b.	\$	0.00
4c.	Hom	e maintenance, repair,	and upkeep expenses		4c.	\$	100.00
4d	Hom	eowner's association of	r condominium dues		4d	\$	0.00

Debtor 1

CHAUNCEY HOLLINGBERRY

First Name Middle Name Last Name

Case number (if known)_

			Your exp	penses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	275.00
	6b. Water, sewer, garbage collection	6b.	\$	72.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	80.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	301.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	85.00
10.	Personal care products and services	10.	\$	50.00
11.	Medical and dental expenses	11.	\$	60.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	300.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	132.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	50.00
	15d. Other insurance. Specify:	15d.	\$	0.00
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form B 6I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			0.00
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inco	ome.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e Homeowner's association or condominium dues	20e	\$	0.00

Debtor 1	CHAUNCEY HOLLINGBERRY First Name Middle Name Last Name	Case number (if known)		
	This rune mode rune Last rune			
21. Other . S	pecify: STUDENT LOAN	21.	+\$	250.00
	onthly expenses. Add lines 4 through 21. t is your monthly expenses.	22.	\$	2308.60
	your monthly net income.	-	\$	2201.81
	by line 12 (your combined monthly income) from Schedule I. by your monthly expenses from line 22 above.	23a. 23b.	-\$	2308.60
	otract your monthly expenses from your monthly income. e result is your <i>monthly net income</i> .	23c.	\$	-106.79

24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your

UNITED STATES BANKRUPTCY COURT DISTRICT OF ARIZONA PHOENIX DIVISION

	PHOENIX DIVISION			
In re <i>chauncey hollingberry</i>		Case No. Chapter 7		
	/ Debtor			
_	APTER 7 STATEMENT OF INTENTION. (Part A must be completed for EACH debt which is secu			
Property No. 1				
Creditor's Name: MOVEMENT MORTGAGE	Describe Property Secu REAL ESTATE: 3607 85326	ring Debt: S 257TH LN. BUCKEYE, AZ		
additional pages if necessary.)	(fo	r example, avoid lien using 11 U.S.C § 522 (f)). r each unexpired lease. Attach		
Property No. Lessor's Name: None	Describe Leased Property:	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2):		
I declare under penalty of perjury that the abo and/or personal property subject to an unexpi	Signature of Debtor(s) ove indicates my intention as to any property of my elired lease. Debtor: /s/ CHAUNCEY HOLLINGBERE			
Date:	Joint Debtor:			

UNITED STATES BANKRUPTCY COURT DISTRICT OF ARIZONA PHOENIX DIVISION

In re:CHAUNCEY HOLLINGBERRY	Case No.
FKa CHAUNCEY COOK	(if known)
Debtor	

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not diclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor my also be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporation debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. §101(2), (31).

1. Income from employment or operation of business

par cor ma

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

2014 YTD:\$13,848.61 2013:\$18,109.00 INCOME FROM EMPLOYMENT

2013:\$18,109.00

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor, made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS**

AMOUNT PAID

AMOUNT STILL OWING

* Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Creditor: MOVEMENT MORTGAGE

04/2014-06/2014

\$1,660.80

\$77,699.07

Address: 1 CORPORATE DR

Lake Zurich, IL 60047

None

X

SUITE 360

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filingunder chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None X

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

GINDIRA KELLY MCLEMORE VS.

CIVIL

SOUTH MOUNTAIN JUSTICE COURT

COMPLAINT

CHAUNCEY COOK (HOLLINGBERRY) CC2013-054332

None \boxtimes

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

None \boxtimes

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6.	Assid	nments	and	receive	ships

None \boxtimes

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None \boxtimes

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

None \boxtimes

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None \boxtimes

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT. NAME OF PAYER IF OTHER THAN DEBTOR DESCRIPTION AND VALUE OF PROPERTY

Payor: CHAUNCEY HOLLINGBERRY

AMOUNT OF MONEY OR

Payee: MATTHEW HARTLEY

10. Other transfers

Address:

11225 N 28th Dr.

Suite B 103

Phoenix, AZ 85029

\$845.00 Date of Payment:

None \boxtimes

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None X

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a benificiary.

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

Institution: CHASE BANK Address: PO BOX 659732 SAN ANTONIO, TX 78265

NAME AND ADDRESS OF INSTITUTION

Account Type and No.:CHECKING (0302) Final Balance:\$0

05/2014

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

Debtor: CHAUNCEY HOLLINGBERRY Name(s): CHAUNCEY 06/2011-Address: 6431 W BASELINE RD. HOLLINGBERRY 06/2013

LAVEEN, AZ 85339

Debtor:CHAUNCEY HOLLINGBERRY Name(s):CHAUNCEY 06/2013-Address:3840 N 43RD AVE HOLLINGBERRY 12/2013

PHOENIX, AZ

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

None

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulation, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor.

including, but not limited to disposal sites.

"Hazardous Material" means anything defined as hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar termunder an Environmental Law:

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

None

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law, with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

NAME

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN

ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

21151110 571120

POWDER PUFF, LLC.

ID:46-0538368

5045 W BASELINE RD. LAVEEN, AZ VENDING MACHINE DISTRIBUTION 11/2012-CURRENT

85339

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	6/3/2014	Signature	/s/	CHAUNCEY	HOLLINGBERRY
		of Debtor			
Date		Signature			
		of Joint Debto	r		
		(if any)			

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(h), 110(h), and 34(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.				
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social-Security No.(Required by 11 U.S.C. § 110.)			
If the bankruptcy petition preparer is not an individual, state the name, title (if any), person, or partner who signs this document.	address, and social-security number of the officer, principal,, responsible			
Address				
X	Date			
Names and Social-Security numbers of all other individuals who prepared or assiste not an individual:	ed in preparing this document unless the bankruptcy petition preparer is			
If more than one person prepared this document, attach additional signed sheets co	onforming to the appropriate Official Form for each person			

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. § 156.

UNITED STATES BANKRUPTCY COURT DISTRICT OF ARIZONA PHOENIX DIVISION

In re <i>CHAUNCEY HOLLINGBERRY</i>	Case No.		
FKa CHAUNCEY COOK	Chapter 7		
	/ Debtor		
Attorney for Debtor: MATTHEW HARTLEY			
, MATTHEW HARTLEY	, do hereby certify, under penalty of perjury, that the Mailing List,		
consisting of sheet(s) is complete, or	correct and consistent with the debtor(s)' schedules.		
Date of execution: 6/3/2014	/s/ CHAUNCEY HOLLINGBERRY		
Date of execution. 07372011	Debtor		
/s/ MATTHEW HARTLEY			
Attorney (if applicable)	Spouse		

CHAUNCEY HOLLINGBERRY

AMERICAN EDUCATION SERVICES/RB 1200 N 7TH ST HARRISBURG PA 17102

AMERICAN EXPRESS
PO BOX 981537
EL PASO TX 79998

ARIZONA DEPARTMENT OF REVENUE 1600 W MONROE STREET PHOENIX AZ 85007

BANK OF AMERICA PO BOX 982235 EL PASO TX 79998

CHARTER ONE BANK FSB 833 BROADWAY ALBANY NY 12207

CHASE CARD SERVICES
PO BOX 15298
WILMINGTON DE 19850

FEDERAL LOAN SERVICING PO BOX 60610 HARRISBURG PA 17106

GINDIRA KELL MCLEMORE 4433 W PASEO WAY LAVEEN AZ 85339

IRS
PO BOX 21126
PHILADELPHIA PA 19114

MOVEMENT MORTGAGE

1 CORPORATE DR

SUITE 360

LAKE ZURICH IL 60047

CHAUNCEY HOLLINGBERRY

SOUTH MOUNTAIN JUSTICE COURT C 620 W JACKSON ST PHOENIX AZ 85003